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12-20-06

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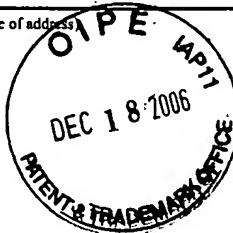
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7590

10/02/2006

Cameron Kerrigan
 Squire, Sanders & Dempsey L.L.P.
 Suite 300
 One Maritime Plaza
 San Francisco, CA 94111



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Yayoi Barrack

(Depositor's name)

(Signature)

December 18, 2006

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/630,261	07/30/2003	Syed F. A. Hossainy	50623.276	8699

TITLE OF INVENTION: BIOLOGICALLY ABSORBABLE COATINGS FOR IMPLANTABLE DEVICES AND METHODS FOR FABRICATING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/02/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS		12/21/2006 GWORDOF2 00000043 071850	10630261	
KENNEDY, SHARON E	1615	424-423000	01 EC:1501 05 EC:1504 03 FT:14001	1400.00 DA 300.00 DA		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Advanced Cardiovascular
 Systems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, California

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

Issue Fee
 Publication Fee (No small entity discount permitted)
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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Typed or printed name Zhaoyang Li, Ph.D.Date December 18, 2006Registration No. 46,872

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number	10/630,261
Filing Date	July 30, 2003
First Named Inventor	Syed F.A. Hossainy
Group Art Unit	1615
Examiner Name	Sharon E. Kennedy

Attorney Docket Number

50623.276

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Postage Paid Return Postcard	<input type="checkbox"/> Drawing(s) Formal ____ Sheets with Submission of Formal	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment and Response to Office Action (____ pages)	<input checked="" type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) (2 pages)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Amendment Transmittal Letter (____ page) (in duplicate)	<input type="checkbox"/> Request for Continued Examination Transmittal (RCE)	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Fee Transmittal Form (in duplicate)	<input type="checkbox"/> Request for Status of Application
<input type="checkbox"/> Petition for Extension of Time (____ month) (1 page) (in duplicate)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement with Form PTO-1449 citing ____ References	<input type="checkbox"/> Terminal Disclaimer (1 page)	
<input checked="" type="checkbox"/> Express Mail Label No. EV 721 154 810 US	<input type="checkbox"/> Statement of Common Ownership	
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<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Zhaoyang Li, Ph.D., Reg. No. 46,872
Signature	
Date	December 18, 2006

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Signature		Date	December 18, 2006

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